

Billing Procedures for EIBI State Funded Services

The document Billing Procedures for EIBI State Funded Services outlines how EIBI Providers are to bill the South Carolina Department of Disabilities and Special Needs (SCDDSN) for EIBI services provided to PDD participants in any type State Funded slot (e.g. regular State Funded, Temporary State Funded, and Extensions).

- All PDD EIBI Qualified Providers who render State Funded EIBI services will be required to bill the Department of Disabilities and Special Needs (DDSN) in accordance with the following guidelines. Failure to adhere to this process will result in the return of all paperwork and will delay remittance.
- All billing for PDD State Funded EIBI services must be submitted to DDSN using the **PDD State Funded Program Billing Form (PDD Form 18)** and the **PDD State Funded Program Billing Invoice (PDD Form 47)**.
- The **PDD State Funded Program Billing Form** is designed to calculate totals once service units/hours are input.
- Providers may elect to bill semi-monthly or monthly. If a Provider bills semi-monthly, the billing date range must run from 1st – 16th and 17th through the end of the month. If a Provider bills monthly, the billing date range must run from 1st through the end of the month. All billing forms and invoices must be received within 10 days of the end of either billing cycle.
- All submitted Billing Forms must contain at a minimum the following information to be considered complete:
 - a. Provider's Name
 - b. Consumer's Name
 - c. Consumer's Social Security Number
 - d. Date Range
 - e. Signature of the Originator
 - f. Date of Submission
- In addition, each consumer's Billing Form must capture all EIBI services provided to that consumer during the selected billing cycle. For example, if a semi-monthly billing cycle is selected, all Assessment, Program Development and Training, Line Therapy, Lead Therapy and Plan Implementation services provided to the consumer during the two week period must be documented on the one form.

- Once the PDD State Funded Program Billing Form has been completed, signed and dated, it must be forwarded to DDSN with the PDD State Funded Program Billing Invoice. The Invoice should list the total units/hours provided for each EIBI service, the cost for that service and a total cost for services rendered to the consumer for that billing cycle.
- If a consumer has insurance that covers ABA therapy, the insurance carrier must be billed first. If the insurance carrier was billed and some portion of the bill was denied (i.e. the deductible has not been met or applicable co-payments), the EIBI Provider may bill DDSN for the outstanding balance. The Provider must submit the aforementioned forms **and** an Explanation of Benefits (EOB) from the consumer's insurance carrier. The submitted documents will be reviewed to determine if payment is appropriate.
- Forms determined to be incomplete will be returned to the provider. If it is determined that payment for time currently submitted has been paid previously, the forms will be returned.
- Remittance will be made to the provider at the address on record.
- All information must be sent to Debra Leopard at DDSN Cost Analysis, 3440 Hardin Street, P.O. Box 4706, Columbia, South Carolina, 29240.

